

Docket: 5333USA (6619)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor:

Paul E. DiMario

Application No.:

09/487,027

Filing Date:

January 19, 2000

Examiner:

C. R. Harmon

Title:

AN APPARATUS FOR PACKAGING

GOODS IN AN OPEN-BOTTOMED

CONTAINER AND METHOD FOR DOING THE SAME

Group Art Unit:

3721

TRANSMITTAL LETTER

Mail Stop AF	'
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Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 I hereby certify that this document is being sent via First Class U.S. mail addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, 2004. Alexandria, VA 22313-1450 on this_ day of KrisAnne Popovits

Dear Sir:

The following documents are enclosed in connection with the above-referenced patent application:

- Amendment After Final (Under 37 CFR 1.116) (18 pages); 1.
- Fee Determination (After Amendment of Claims) (1 page); and RECEIVED 2.

3. Return Receipt Postcard.

TECHNOLOGY CENTER H3700

Respectfully submitted,

DORSEY & WHITNEY LLP **Customer Number 25763**

Date:	7-	7-04	

Reg. No. 50,873

Intellectual Property Department

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FEE DETERMINATION
(After Amendinant of Claims)

JUL 1 2 2004 &

	Complete if Known
Application No.	09/487,027
Filing Date	January 19, 2000
First Named Inventor	Paul E. DiMario
Group Art Unit	3721
Examiner Name	C. R. Harmon
Atty. Docket Number	5333USA (6619)
o Office Action detact.	0.4/0.0/0.0.4

Claims a Page inded in Response to Office Action dated: 04/08/2004

METHOD OF PAYMENT (Check One)				AMENDMENT FEE CALCULATION (Continued)			ed)				
1. 🖾	The Director is I credit any over Deposit Accoun Deposit Accoun	payments to t No.: <u>04-1</u> t Name: <u>D</u>	o: 420 ORSEY	<u>& WH</u>	IITNE'	Y LLI	<u>P</u>	Large Entity Fee	Small Entity Fee	3. ADDITIONAL FEES Fee Description	Fee Paid
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2.	Applicant claims Check Enclosed		ly status	(see	37 C.F	n.	1.21)	420	210	Extension for reply within second month	
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	after Pr	reviously aid for	Extra		om elow*	•	Additional Fee	2,010	1,005	Extension for reply within fifth month	
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First Pr	esentation of					=		330	165	Filing brief in support of appeal	
Multiple	Dependent Clain	n		×				290	145	Request for oral hearing	
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		culation of I	Extra Cla	im Fe	es			1,330	665	Petition to revive – unintentional	
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Fee		1 00 003	ochpilon					180	180	Submission of IDS	
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										Total Amount of Payment:	0

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	Minneapolis, MN 55	5402-1498					
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Signature: //. (/) ade	11	-	Date: 7-7-04				